

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

DAVID J. PARINS

Title:

MEDICAL DEVICE COIL

Filed:

September 5, 2003

Docket No.:

1001.1675101



TRANSMITTAL SHEET

Mail Stop: Patent Application Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

CERTIFICATE UNDER 37 C.F.R. 1.10: The undersigned hereby certifies that this paper or papers, as described herein, are being deposited in the United States Postal Service, "Express Mail Post Office to Addressee" having an Express Mail mailing label number of: EV333849800US, in an envelope addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313- 450 of this ________, day of _________, 2003.

By July of Jepton

Dear Sir:

We are transmitting herewith the attached Patent Application including the following:

- Transmittal Sheet, containing Certificate under 37 C.F.R. 1.10
- Utility Patent Application: Spec. 28 pgs; 63 claims, Abstract 1 pg.
- Three (3) sheets of formal drawings
- Signed Combined Declaration and Power of Attorney
- An Assignment of the invention to <u>SCIMED LIFE SYSTEMS, INC.</u> is being filed contemporaneous with this patent application
- A check in the amount of \$1,860.00 is enclosed (\$750 filing fee) (\$1,110 claims)
- A check in the amount of \$ 40.00 is enclosed (\$40 recordation fee)
- Return postcard
- Please charge any deficiencies or credit any overpayment in the enclosed fees to Deposit Account No. 50-0413

| TOTAL FILING FEE | | | \$ 1,860.00 | |
|--------------------|-----------|---------|-------------|-------|
| INDEPENDENT CLAIMS | 7 – 3 = | 4 | x84= | \$336 |
| TOTAL CLAIMS | 63 – 20 = | 43 | x18= | \$774 |
| BASIC FEE | | | | \$750 |
| FOR: | # FILED | # EXTRA | RATE | FEE |

By:

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